The Imperative Investment: Love and Cooperation for Children

Biennial Report, 1988-89

Volume 6



by the Children's Services Commission

Table of Contents

5

Vision for Missouri's Children

6 - 7

Word from the Chair

Members

8 - 11

Department Goals

12 - 13

Financial Summary

14 - 15

Children in Poverty study

Children's Budget Coalition

16 - 17

Family Week

18 - 19

Youth 2000 Initiative

20 - 21

Caring Communities

CASSP - Missouri Child and

Adolescent Service System

Project

Coordinating Council for Health

Education of Missouri's

Children and Adolescents

22 - 23

Child Fatality Review

Conferences

G.L. vs Zumwalt

24

UMC Extension/Kellogg

Foundation Youth Initiative

25 - 26

Conclusion

Vision for Missouri's Children



All of Missouri's children should grow up with love and security in a healthy environment, each equally experiencing personal dignity, integrity and respect, and each having the opportunity to be the best he or she can be.

To ensure the accomplishment of this vision, every child must have access to:

- a permanent, stable, safe and sanitary living environment;
- proper nutrition and health care;
- support and supervision which assures social and emotional development;
- quality and effective education that gives equal opportunity for individual success;
- employment and career training that leads to an independent and productive life.

When parents are unable or unwilling to provide these benefits or protections, the state will assist the parents as appropriate or assume its legal responsibility and provide for the needs of their children.

Adopted by the Missouri Children's Services Commission, December 8, 1986.

from the Chair



H ans Christian Anderson, one of the world's best-loved authors of children's stories, discussed the march for his funeral with the musician who was to compose it: "Most of the people who will walk after me will be children, so make the beat keep time with little steps."

It seems that few of the social structures we have built in our society were done with forethought for those of us who walk with little steps. Families are expected to raise their children to productive adulthood with little prior preparation in parenting and little economic and moral support along the way.

When we address greater economic and social issues, we forget to build in the elements that comprise a nurturing environment, one that will protect a child from the worst of the

hazards of growing up. We lose far too many children to poverty, abuse, illiteracy and ill-health. It is far too costly to repair what could have been prevented. It is awesome to consider the potential that has been lost, the contributions that could have been made, had we built a society that kept time with the little steps.

The Children's Services Commission was established with these thoughts in mind. This unique body is comprised of members from all three branches of state government — executive, legislative and judicial. The Commission encourages cooperation among all child serving agencies, including these in the private sector. Collectively, we are attempting to find innovative ways to promote the well-being of families and children in Missouri through better coordination of publicly funded services.

Sound management, fiscal responsibility and wise allocation of existing resources are regarded as

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Vice Chair

Dr. Robert Harmon Director

Missouri Department of Health

Secretary/Recorder

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Department of Mental Health
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Department of Public Safety
Senator Dennis Smith
Mr. Mark Steward, Director
Division of Youth Services
Senator Harry Wiggins
Ms. Paula Willmarth, Director
Division of Family Services

essential if there are to be responsive programs. But the Commission recognizes, too, as a legislatively mandated body, that it must also promote a coordinated social agenda for children — one which promotes a world in which children can grow up healthy, secure, and ready to tackle the challenges of life with intelligence and grace.

On behalf of the Missouri Children's Services Commission, I am pleased to present the biennial report of Commission activities for 1988-89. The last two years have brought many changes to the Commission, including legislation, passed in 1989, to create a new structure and new funding oppor-

tunities for the Commission.

We are also discovering new opportunities for joining in the work of others who share our concerns, for example, the University Extension, which is undertaking a

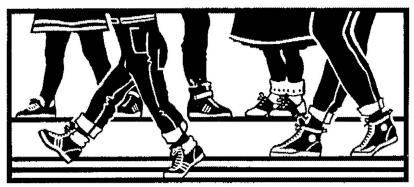
major new initiative in community coordination of children's services, and the recently established National Commission on Children, which shares our mission at the national level.

We are excited about the prospects for building policies and systems that keep time with little steps. It is a challenging and creative process... not unlike childhood itself,

Sincerely,

RHARMON

Robert G. Harmon, M.D., M.P.H. Director, Department of Health



Members - 1989

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Representative Kaye Steinmetz
Vice Chair

Mr. Richard Rice, Director
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Dr. Keith Schafer, Director
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Representative Gene Lang
Senator Henry Panethiere
Judge John Parrish
26th Circuit Court
Representative Sue Shear
Senator Dennis Smith
Mr. Gary Stangler, Director
Department of Social Services



Department goals for children's services

Department of Elementary and Secondary Education

The following goals were approved by the State Board of Education:

By the year 2000, reduce the dropout rate from the current 25% to 10%.

By the year 2000, reduce the age 18 illiteracy rate from 30% currently, to 10%.

By the year 2000, increase the level of participation of eligible families in the Parents as Teachers program from the current 30% to 70%.

By the year 2000, the typical student will master 80% of stateidentified key skills on the Missouri Mastery and Achievement Tests in each subject area.

Department of Health

The following are DOH Year 2000 goals for improving the health status of children or the quality of services offered them.

Expanded adolescent preventive health services will be developed and implemented throughout the state in cooperation with state and local agencies and resources.

- A self-esteem and peer support intervention program will be available to all adolescents in order to reduce substance abuse, teenage suicides, accidents, and accidental deaths by at least 50%.
- Births to women less than 18 years of age will be reduced from 4.8% to 3% or less.
- Comprehensive physical and mental health services will be available to all school-age children between 10 and 18.

All women and infants should be served at levels appropriate to their needs by a regionalized system of primary, secondary and tertiary care for prenatal, maternal and perinatal services.

- The infant mortality rate will be reduced from 10.2 infant deaths/ 1000 live births to no more than 7.0.
- The low birth weight percentage (babies weighing less than 5.5 pounds at birth) will be reduced form 6.7% to less than 5.0%.
- At least 95% of all newborns will be screened for treatable genetic and metabolic diseases.
- At least 95% of all pregnant women will receive adequate prenatal services.

 Less than 8% of children in Missouri should be below the 5th percentile for height-for-age because of dietary inadequacy.

Comprehensive school health education will be provided to every school-age child in Missouri through a cooperative effort of the Department of Health and the Department of Elementary and Secondary Education.

- Core competencies and key skills in health will be developed, implemented and evaluated through methods such as Basic Educational Skills Testing (BEST) for all students in grades K-12.
- Students' health knowledge, attitudes and behaviors will be continually assessed to develop prevention and intervention strategies.

Missouri will have a system to monitor the incidence of injuries and develop appropriate injury prevention and control programs for high risk populations.

- Death rates from intentional and unintentional injuries will be reduced by 25% (from 55.3 cases per 100,000 population to 41.5).
- The state will be covered by a network of poison treatment hospitals linked with the state poison control center which will establish statewide awareness of the poison center's toll-free phone number.

Through a joint public and private sector effort, Missouri will experience a reduction in morbidity and mortality associated with tobacco use and addiction.

- The proportion of Missourians ages 12 to 18 years who smeke will be reduced from 12% to 3% or less.
- The proportion of women who smoke during pregnancy will be reduced from 29% to 5% or less.

A system of communicable disease controls, including the provision of diagnostic testing services, will be in place to reduce the incidence of communicable diseases.

- The incidence of the diseases listed below will be reduced as follows: (per 100,000) Chicken pox will be reduced from 50 to 25; Hepatitis A from 2 to 1; Giardiasis from 9 to 7; Haemophilus influenzae infections from 2 to 1; attack rate of food-borne illness from 14 to 11; Tuberculosis from 6 to 3; and reported gonorrhea cases from 398 to 244.
- Each reported case of measles, rubella, diphtheria, mumps, syphilis, chlamydia, and resistant gonorrhea will be investigated for the purpose of implementing effective control measures.

The Department of Health will develop an electronic communications system to integrate services at the state and local level.

 Each of the local public health units and federally-funded primary care providers will have integrated and confidential computer access to a public health client record system to amplify service delivery.



Department of Mental Health

The DMH goal for children's services is to keep inpatient and residential care at a bed level consistent with the number of children who actually need those services and to develop a system of intensive community-based services to preserve children within their families and communities.

A second goal is to work with other state agencies to establish cooperative agreements for improved coordination of services.

Projects underway pursuant to these goals include the Families First Project to help children with severe psychiatric disorders handle their problems within their home settings, the Family Preservation Services interagency delivery model which is a pilot under implementation by DMH, DSS, DESE and Citizens for Missouri's Children, CASSP - the Child and Adolescent Service System Project which is responsible for interagency policy and planning and Caring Communities, another interagency pilot to keep troubled children in their own homes, schools and communities.

Department of Public Safety

The safety and welfare of Missouri's children is an abiding concern of the Department of Public Safety. The department supports a wide range of measures and activities designed to safeguard the health and well-being of children and adolescents in our state. In addition to those public safety and law enforcement actions mandated by law, DPS will:

- Continue to support expansion of alcohol and substance abuse education programs in grades K-12;
- Continue to support increased motorcycle and bicycle rider training and education;
- Continue to promote seat belt usage and proper usage of infant restraint seats with goals •f 70% usage by the end of 1990;
- Continue to support efforts to reduce fatal crash involvement for young drivers, reducing fatalities from 24.1% to 20% by 1991;
- Continue to promote safe boating instruction and education throughout the state;
- Continue to promote fire safety training for children throughout the state;
- Continue to provide training and education programs designed to teach children and adolescents how to prepare for and protect themselves in the event of natural and man-made disasters, emphasizing tornado and earthquake safety;

- Continue to provide support for programs that provide shelter and safe haven to abused children;
- Continue to promote the coordination and imprevement of the Juvenile Justice System in Missouri;
- Continue to cooperate with the American Legion to conduct an annual Missouri Cadet Patrol Academy;
- Continue to support and encourage youth participation in the Civil Air Patrol.

Department of Social Services

The following are DSS objectives which have a bearing on the quality and availability of services offered to children and their families.

Implement a full-scale prevention effort addressing at-risk youth at all levels. This program would target both children and families, promoting stable and socially acceptable lifestyles, while lessening the incidence of youth entering the juvenile justice system.

Make family preservation services available throughout Missouri by 1995 thereby reducing the percentage of children who must be removed unnecessarily from their homes.

Reduce the percentage of children experiencing three or more placements during the first year in foster care to a level below the national average.

Provide necessary and appropriate services to youth who can reside in their home communities

while receiving rehabilitative and educational services.

Help courts in developing early intervention projects which will divert at-risk youth from further penetration into the juvenile justice system.

Develop resources to provide appropriate and timely residential rehabilitative services to youth committed to the department's care.

Bring the infant mortality rate experienced by the Medicaid population closer to that experienced by the rest of the population.

Maintain a physician provider pool that assures access to health care services in each Missouri county.

Improve the level and availability of services financed by Missouri Medicaid.

Place additional emphasis on the Learnfare program as a solution to long-term receipt of public assistance. Focus on providing or extending services to recipients to help bridge the gap from public assistance to the productive workforce.



Financial Summary

The Children's Services Commission operates on donations, grants and fees for publications. Donations include both financial contributions and the contribution of staff time and resources by each of the member agencies.

When the federal Juvenile Justice Delinquency Prevention Act grant ended in 1988, the CSC was no longer able to maintain full-time staff. This created a great hardship for the

CSC in fulfilling its obligations. Progress toward many of its projects has slowed without full-time staff. Member departments have donated time from their own staffs to assist with meetings and to carry out some of the special projects undertaken by the CSC; however, continuity has been broken and momentum has been lost. A major priority of the CSC will be to regain full time staff for Commission support.

Donations

We deeply appreciate the generous contributions of the following people and organizations over the past two years:

- Friends of Kay Steinmetz in memory of Dr. Donald Thurson
- Maritz, Inc.
- Business Men's Assurance Co.
- ♦ Union Electric (Printing of Annual Report)
- Southwestern Bell Telephone (Year 2000 Project)
- Anheuser Busch Co.
- Kaye H. Steinmetz in memory of state representatives William E. "Bud" Lewis and Paul Page
- Members, Children, Youth and Families
 Subcommittee in memory of Frank Lang
- Sue Shear in recognition of the honorary degree conferred upon Marion Cairns
- Col. Richard Rice

Budge	et Summary	,						
	Beginning Balance	Receipts	Available <u>for use</u>	<u>Expenses</u>	Ending <u>Balance</u>			
FY 88	\$38,336.46	\$6,359.29	\$44,695.75	\$36,174.69	\$8,521.06			
FY 89	\$8,521.06	\$2,670.14	\$11,191.20	\$3,079.15	\$8,112.05			

Receipts	FY88	FY89
JJDP Act Grant	\$4,452.94	\$0.00
Denations	265.00	2,050.00
Publications	50.00	0.00
Interest	1,591,35 620	
Total receipts	\$6,359.29	\$2,670.14
<u>Expenditures</u>	FY88	FY89
Salaries	\$17,138.94	0.00
Fringes	4,486.89	316.67
Travel & Mtg.	3,028.46	408.74
Printing	484.01	2,233.74
Supplies	1,487.25	120.00
Postage	3,003.98	0.00
Telephone	1,156.23	0.00
Publications	0.00	0.00
Advertising	0.00	0.00
Refunds*	<u>5,388.93</u>	0.00
	\$36,174.69	\$3,079.15



Children in Poverty

This year saw the completion of an important study: Children in Poverty, Present and Future: State Options for Reducing Poverty, by the Institute of Applied Research under the direction of the Children's Services Commission and Citizens for Missouri's Children.

Sadly, children experience the highest poverty rates of any single group in America. In Missouri, over 18% of our children live in poverty. The Children's Services Commission requested this study to see what it would take to reduce the child poverty level to that of the adult population, which is now below 14%.

Findings

Most live in two-parent families.

- In the majority of poor families, at least one parent worked during the year but could not earn enough to support the family. In 1987 a minimum wage job earned \$2,101 below the poverty level.
- In mother-only families, poverty is greater because 1) they work less, 2) they earn less when they do work, and 3) they receive astonishingly low amounts of child support paid by absent fathers.
- The total value of government transfers to families with children has diminished. Missouri's maximum benefit for a family of three is \$282, an increase of only \$79 from 1977 to 1988. Adjusted for inflation, this is a 26.8% decline.
- Two-thirds of the children in poverty in Missouri are white.
- One-third live in rural areas; nearly three fourths of poor children are found either in the central city or in rural areas.

Policy Options

- Assure adequate child support through improved collection and payment through employer withholding from earnings of noncustodial parents.
- 2) Increase AFDC benefits.

- Improve economic development with specific efforts targeted to poor families (including the minimum wage).
- Increase medical coverage for poor and near-poor families.
- 5) Improve availability and quality of child care in Missouri.
- Enhance linkages between dropout prevention and adult basic education.

- 7) Reduce adolescent pregnancy.
- 8) Enhance education, employment and training programs by improving coordination.
- Supplement employment and training funds with state general revenue funds.
- 10) Increase the base of knowledge about Missouri's families with children.

Children's Budget Coalition

Children's Budget Day was held February 5, 1988. It consisted of a ne-day workshop to explain the appropriation process.

Coalition

Recommendations:

- a) Missouri state officials should establish a plan to raise Missouri's national ranking within the top twenty states providing social, educational, health and mental health services to children.
- b) Missouri officials should raise the amount of state funding allocated for prevention and early intervention services to children and their families.
- c) Budget proposals presented by the Governor and the Depart-

ments should provide documentation to the Legislature
and to citizens on the number
of children who will be served
under each program, the
number who will not be served
because of insufficient funds and
the amount of funding necessary
to serve those in need.

- The CSC d) member agencies should continue to annual hearings to receive input from citizens regarding budget priorities before Department decisions are made; streamline and simplify agency budget documents that include uniform descriptions of services, unit costs, and performance measures; and dedicate 10% of all new funding for each fiscal year for prevention programs.
- e) The percentage of Missouri's children who live in poverty should be reduced from the present 20% to less than 5% by the year 2000.



Family Week, 1988

Debbie Versluys, a 9-yearold from Bridgeton, won the grand prize in a statewide contest for her essay about her "blended" family. Debbie's essay was chosen as the best of 900 entries received in the Family Week essay contest.

Family Week, observed May 1-8, 1989, was an initiative of the Children's Services Commission and organized by the Department of Elementary and Secondary Education for the purpose of:

- enhancing public perception of the family as being one of the most essential elements to a happy life and a strong society;
- emphasizing the importance of good parenting and a healthy family system;

- acknowledging different types of family structures as they pursue a loving environment for children; and
- increasing the public's awareness
 of the family's importance in the
 development of a stable, nurturing and loving environment
 capable of transmitting knowledge and values between
 generations.

Special events across the State highlighted the importance of families and the value of home life to each individual. Numbers of Missouri businesses, large and small, submitted examples of business policies designed to strengthen the family ties of their employees and many Missouri municipalities and cities issued proclamations or hosted Family Week activities. Family Week public announcement was produced by the CSC and was aired on a number of the state's media stations. Most of the state's newspapers reported publicity about Family Week and notified the public of the Family Week Essay Contest.

Every member of every Missouri family, regardless of age, was eligible to participate in the "Missouri Living—Family Style" essay contest. The rules were simple — "In 200 words or less, describe your family's style and what makes it special." Over 900 essays were judged by a panel from the Missouri Association of Family and Marriage Therapists in late April.

During a special Family Day celebration in Jefferson City, Governor Ashcroft presented awards to Debbie and six runners-up honored in the essay contest. The event was hosted by the Governor, the Department of Natural Resources, the Department of Economic Development – Division of Tourism, the Missouri Jaycees, and the state agency members of the Children's Services Commission. Nearly 2,000 people attended.

Debbie's prize was a vacation package in St. Louis or Kansas City for up to 10 members of her household. The six runners-up each received all-day passes to either Silver Dollar City in Branson, Six Flags near St. Louis or Worlds of Fun in Kansas City. The runners up were:

Mrs. Carel Clark, Winfield Mrs. Janet Hughes, Easton Kara Kircheff, Blackburn Marceline Kirkpatrick, Kansas City Curtis R. Peters, Halfway

1650EF State Paris

Debbie Versluys receives her award from Governor Ashcroft.

The award-winning essay...

Missouri Living-Family Style, by Debbie Versluys

"In my family there are eight people. There are my mom, dad, stepdad, 2 sisters, 2 brothers and me. My family is a blended family, but that isn't what makes my family special. My family is special because we are a blended family that truly cares about each other and loves one another. In my family if one has a problem all have a problem. In fact we try harder to help each other. Since all of us have been through a divorce, we have all known pain, so we choose to work together.

"My real dad is in the Navy in California, but we call every week. My dad is an important part of my family because I can talk to him about my problems and he helps me like a friend. Even though we are 2,000 miles apart we are still close. I love my new dad too. When we are together we have a lot of fun and we tell secrets.

"I'm glad I'm part of a blended family. I didn't have to give up my dad, but I now have a bigger and better family. I'm trying to do my part to make this family work."

Youth 2000 Initiative

In October, 1987, Missouri was one of thirteen states to receive funding from the U.S. Departments of Health and Human Services and Labor under their Youth 2000 program. The Youth 2000 movement enlists all sectors of society in helping vulnerable youth achieve social and economic self-sufficiency and fulfill their potential as viable, contributing members of society. The campaign is designed to create a grassroots movement across this country to mobilize support for our youth. This agenda grew out of the knowledge that 10 to 15% of youth 16-19 years old in the general population, are at risk of not successfully making the transition into productive, responsible adulthood.

The Missouri Youth 2000 proposal called for statewide implementation of a methodology that would result in coordinated policy development and service delivery for the youth of Missouri. In May of 1988, under the direction of Dr. Michael Reagen, former director of the Department of Social Services, a forty-one member Youth 2000 steering committee was convened to further define and guide the implementation process. Committee members represent a wide crosssection of Missouri, including business, academia, civic leaders, local government, labor, the philanthropic community, not-for-profit organizations, health care, the media and the agricultural community.

Seven regional teams were also established to provide structural

support for developing local goals. Efforts undertaken by the Steering Committee and regional teams galvanized diverse interest groups to focus on the Youth 2000 agenda and culminated in a statewide Youth 2000 Conference held in St. Louis on November 29-30, 1988. A report detailing the conference and subsequent progress is being published.

Missouri Youth 2000 envisions that all our young people will become healthy, competent citizens in work, family and community life. Youth 2000 goals for Missouri youth are:

- employment and economic selfsufficiency;
- improved literacy and educational attainment;
- reduction in the incidence of teen pregnancy;
- lifestyles free from substance abuse;
 and
- reduction in violent and accidental injuries and death.

Youth 2000 project implementation goals include:

- strengthening the state Youth 2000 Steering Committee;
- expanding and strengthening partnerships through relationships and collaboration;
- facilitating the exchange of information among the Youth 2000 participants and other networks;
- increasing 2000 visibility; and
- maintaining a constant effort in support of the regional Youth 2000 teams.

A Resolution Proclaiming a Partnership Between the Children's Services Commission and the Leadership of the Missouri Youth 2000 Initiative

Whereas, demographic trends present us with a tremendous window of opportunity that, by the year 2000, there will be a job available for every qualified young person who wants one; and

Whereas, employment opportunities will increasingly require workers who are able to read, compute, learn new skills, and who have acquired education or training beyond high school; and

Whereas, a significant number of our youth are presently at risk of not successfully making the transition from adolescence into productive and responsible adulthood due to various, often interrelated problems, such as teenage pregnancy, alcohol and other drug abuse, dropping out of school, illiteracy, homicide, suicide, and automobile accidents; and

Whereas, there is a need for the support, involvement and commitment of all sectors of society – business, labor, religious organizations, voluntary and professional organizations, educational institutions, federal, state and local governments, adults, parents, and young people themselves – in addressing these problems and working together to develop solutions that build on strengths of the community and the family; and

Whereas, there is an urgent need for heightened public awareness about the issues that threaten to prevent millions of young people from becoming healthy, metivated, and self-sufficient members of society; and

Whereas, Missouri needs the productive energies of all its youth to ensure continued social and economic progress as we move into the 21st Century; and

Whereas, Youth 2000 is a nationwide "call to action" between now and the year 2000 designed to enlist the involvement of all sectors of society in helping vulnerable and at-risk youth achieve social and economic self-sufficency and fulfill their potential as viable, contributing members of society;

NOW, THEREFORE, BE IT RESOLVED BY THE CHILDREN'S SERVICES COMMISSION OF MISSOURI:

That the Children's Services Commission hereby declares a partnership between the Children's Services Commission and the leadership of the Missouri Youth 2000 initiative.

BE IT FURTHER RESOLVED that the Children's Services Commission will foster the partnership and support ongoing Youth 2000 efforts by:

- synthesizing and making available information regarding state initiatives and pilot projects to address children, youth and family needs and issues;
- establishing benchmark data from which progress toward year 2000 goals may be measured and issuing a "report card" in each annual report; and
- sponsoring a Youth 2000 conference or leadership meeting once a year to recognize, support and encourage the activities of the regional Youth 2000 teams and to provide a forum for discussions to target opportunities for state/local and public/private partnerships.

Caring Communities

The CSC developed the idea of focusing multi-agency resources at the community level in a fashion that would enable a community to build its own service matrix to meet its unique needs for youth. Departments involved in the two pilot projects agreed to be more flexible with their existing service structures in order to experiment with structures that

would ease some of the burden on local agencies and combine resources in novel, more responsive ways.

The development of the pilot project in the St. Louis Walbridge Elementary School District is already well underway and is just beginning in Schuyler and Knox counties. Both sites focus on the school system as the primary institution for service delivery.

CASSP - Missouri Child and Adolescent Service System Project

The Departments of Mental Health, Social Services and Elementary and Secondary Education have jointly established the Missouri CASSP Project (Child and Adolescent Service System Project). CASSP is funded by a grant from the National Institute of Mental Health for the improvement of public mental health services for seriously emotionally disturbed (SED) children and youth.

The mission of CASSP is to develop an integrated community-based system of mental health services providing for the unique needs of SED youth. Central to this mission is the development of a statewide system of support and advocacy activities for parents of SED children and youth.

A state-level interagency SED committee, reporting to the CSC, has been established to oversee this project. It is comprised of the Director of Children and Youth Services, CPS/DMH; the Deputy Director, DFS/DSS;

the Deputy Director, DYS/DSS; and the Coordinator, Special Education, DESE.

The Children and Youth Work Group was formed to advise and assist the SED Committee. This group consists of representation from each of the child-serving agencies on the state and local level, mental health service providers, advocates and parents of SED children. Through the work of various task forces the number of SED children in Missouri has been estimated. A target number of these SED children has been identified that the state can begin to realistically serve and a model system of care is being developed which can be replicated on the local level. DMH has a budget request for FY91 to implement this model. If approved, this three-year demonstration project would be implemented in a community to be selected this fiscal year. There will be further work on how much can be accomplished if no new funds are appreved.

Coordinating Council for Health Education of Missouri's Children and Adolescents

This council was established through SB 202 in 1988 within the CSC to examine statewide health education needs and review the coordination of health education services. Funding designated from the MO Says NO project has provided the support of two staff persons.

Accomplishments

The Council has adopted an eight-point comprehensive school health model as the basis for direction. Components of this model include:

- 1) furnishing appropriate services for school health and nursing;
- implementing a comprehensive health curriculum for grades K-12;
- providing a healthy environment in the school;
- integrating school and community health promotion efforts;
- providing physical education activities which promote cardiovascular fitness, strength and flexibility;
- supplying well-balanced food services which contribute to children's health and nutrition needs;

- providing counseling services in school:
- 8) supporting wellness programs for faculty and staff.

Site visits and public forums were conducted in Springfield, St. Louis, Kansas City, and Southeast Missouri, to review existing model health education programs, and gain public input regarding local health education priorities, problems and resources.

The Council surveyed all public and private school districts to assess status of comprehensive school health education needs and implementation. It also consulted with national experts and state university health education professors to examine training needs of teachers responsible for health instruction. It is currently collaborating on an update of the CSC services directory on other health education areas.

All designated components of SB 202 requirements have been studied by the Council. The final report is available through the CSC.

Child Fatality Review

The Division of Family Services, in conjunction with the Children's Services Commission, is in the process of developing a two-level multi-disciplinary child fatality review process. This review process will identify improvements in our ability to identify abuse and neglect as the cause of death among children, and ultimately, to improve government and community response to vulnerable children and their families to prevent the tragic deaths of children.

Committee structure

Child Fatality Review Teams will be established at both county and state levels. Review team members will be selected from many professional disciplines including:

- child protective services:
- physicians and other medical professionals;
- medical examiners/coroners;
- prosecuting attorneys and the attorney general;
- mental health;
- public health;
- public safety and law enforcement;
- juvenile courts; and
- other professionals and agencies who have an interest in child abuse and neglect.

Local process

The two-level process will begin when a county review team member informs the chairperson of the suspicious death of a child. The team may also review suspicious events which cause serious injuries to a child. The chairperson will convene the team

in a timely manner to review the circumstances surrounding the death and determine at a minimum:

- if abuse or neglect contributed to the death or serious injury;
- if there are siblings of the deceased or injured child who may require protection;
- actions which should be taken by the agencies or persons involved with the child and his/her family; and
- if local systemic issues contributed to the death or injury.

State process

The county Review Team will submit its findings and recommendations to the state Review Team. The purpose of the state level review is to:

- review the findings of the county Child Fatality Review Team;
- evaluate how effectively the case was managed by those agencies involved with the child and his/ her family;
- identify the comprehensiveness of current statutes, and agency or administrative policies and procedures relevant to the management of fatal abuse/neglect cases;
- collect statistics; and
- submit an annual report to the Children's Services Commission and other participating agencies and organizations.

An Administrative Rule was published in the July 3, 1989 Missouri Register which will allow the Division of Family Services to implement the child fatality review process.

Conferences

National Council of State Legislators Conference

Kaye Steinmetz represented the CSC at the Conference held July 23-24, 1988 in Reno, Nevada. Commissions similar to Missouri's CSC across the country met in conjunction with National Council of State Legislators to exchange ideas and information.

"Child Care: Preparing for the Future"

NSCL, in cooperation with the Carnegie Corporation, awarded a technical assistance grant to the CSC to improve child care for Missouri's children. The \$5,000 grant supported an independent assessment and an allday statewide conference in October. Participants included individuals representing all areas of child care including the religious community, private providers and agency staff. Recommendations were adopted and will be formally announced in a forthcoming report.

"Partners for Children" Conference

The conference was held January 29-31, 1989 with the goal of increasing the importance of children's issues with legislators and key decision-makers, expanding and energizing a children's constituency, and spurring specific initiatives in child advocacy. The CSC was a co-sponsor.

G.L. vs. Zumwalt

The Children's Services Commission continued to review compliance with the Consent Decree related to Jackson County Foster Children. The Consent Decree remained in effect and the Division of Family Services and Plaintiffs agreed to the appointment of a committee of three to help with implementation.

This committee subsequently appointed a subcommittee composed of the Executive Director of the committee and a representative from the Central Office of DFS to monitor compliance and produce semi-annual reports. It is anticipated that implementation of the requirements of the Decree will continue to follow this course.

UMC Extension/Kellogg Foundation Youth Initiative

A new University Extension program, the Missouri Youth Initiative, will help Missouri communities address threats to their young people from poverty, drug or alcohol abuse, teen pregnancy and stress. The goal of the project is to develop successful preventive programs for youth in Missouri. A major effort will be made to coordinate and integrate current youth programs, to develop special activities and to test the effectiveness of this initiative in six pilot communities.

The project is funded by a \$3.6 million grant from the W. K. Kellogg Foundation of Battle Creek, Michigan. The grant is the largest ever awarded by a private foundation to a division of the University of Missouri and the largest ever given by Kellogg for projects focused solely on youth.

This project is being undertaken in partnership with the Missouri Children's Services Commission. The university has the skills, research capacity and delivery system to develop practical programs to help Missouri youths, and the CSC provides the needed links with state agencies and legislators to monitor programs and policies.

At the local level, six Missouri communities will be chosen as demonstration sites for an intensive four-year pilot project. Both rural and urban communities will be eligible for pilot status.

These communities will document problems, implement programs and document the results for the benefit of other communities with similar problems. A University Extension staff member will serve as the local program manager, building community support and linking the community to the resources of the universities and state agencies. Community program grants will support local program implementation and training for local staff and volunteers.

At the state level, the institutional research and program development capacity of the universities will be strengthened and coordination among the universities, state agencies and communities will be enhanced. University teams will be organized to work with state agencies and local communities to provide research, program development and evaluation, including development of a Youth Data Base to document the condition of Missouri's children. This data base will be a significant milestone in the CSC's efforts to track the effects of system improvements on the health and well-being of Missouri children and plan for a better future.

Conclusion

Many people across Missouri are very concerned about our young people and about our commitment to helping them prepare for their future. These are our children. Their future is our legacy to them. But so far, the threats to their future are greater than the assets we've accumulated. For the first time in history, a generation of children may be less prepared to assume their roles as adults than were their parents.

So many of the problems and challenges facing our children strike at something much deeper than what our social programs have been designed to impact. Existing resources are strained and are used more as bandaids than as genuine solutions. Social structures relied on in the past for child rearing are no longer available. The workforce is changing so rapidly that what children are being educated for today may not meet the needs of business and industry tomorrow when they assume their adult roles. In addition, our workforce will be stretched so thin, we cannot afford to lose a single worker to poor preparation, preventable disease and disability or inadequate social development.

But the projects described within these pages reveal a pattern. We are learning that no single one of us has the answer to all the needs our children face. Rather we each have a piece of the answer and by bringing our separate contributions to the table we

are finding ways to strike at those deeper issues, hopefully in time to prevent problems from developing at all.

At the national, state and community levels, people are drawing together to share their visions, pool their resources, and take more risks. People are becoming much more creative in approaching these issues, whatever their capacity in this movement – from local Youth 2000 boards, to state government leaders such as those on the CSC.

Once a little girl was asked how she set about drawing. She replied, "First I have a think, and then I put a line around it." That's exactly what has been happening with the Children's Services Commission and other child advocates.



Together, we have had a lot of "thinks." We've talked to people who are experimenting with new forms of child care, who have a new perspective on child poverty, who are pursuing local agendas for combating issues like drug and alcohol abuse and teenage pregnancy. We've drawn lines around some ideas of our own through projects like Caring Communities, CASSP and Child Fatality Review.

With information that will be available through the University

Extension Youth Initiative, we will be able not only to better define the issues confronting us, but also to finally be able to focus on specific measurable goals that can be established in policy and tracked as we implement them.

With open minds and optimistic hearts, we face the future. This is the legacy we hope to leave to the children. We have always had the capacity, if not always the good judgment, to shape our future. We can give our children nothing less.



The Missouri Children's Services Commission January, 1990